

# STATE OF ALABAMA — UNIFORM COMMERCIAL CODE — FINANCING STATEMENT FORM UCC-1 ALA.

28430

**Important: Read Instructions on Back Before Filling out Form.**

REORDER FROM  
**Registré, Inc.**  
314 PIERCE ST.  
P.O. BOX 218  
ANOKA, MN. 55303  
(612) 421-1713

<input type="checkbox"/> The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).		No. of Additional Sheets Presented:	This FINANCING STATEMENT is presented to a Filing Officer for filing pursuant to the Uniform Commercial Code.
1. Return copy or recorded original to:  CENTRAL STATE BANK POST OFFICE BOX 180 CALERA, ALABAMA 35040		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
Pre-paid Acct. # _____		<div style="writing-mode: vertical-rl; transform: rotate(180deg);">                         Inst # 1997-06019                     </div> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">                         02/26/1997-06019                          11:14 AM CERTIFIED                          SHELBY COUNTY JUDGE OF PROBATE                          35.20                          001 MCD                     </div>	
2. Name and Address of Debtor (Last Name First if a Person)  CHARLES A. JONES CHERYL H. JONES POST OFFICE BOX 427 CALERA, ALABAMA 35040			
Social Security/Tax ID # _____			
2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person)  _____			
Social Security/Tax ID # _____		FILED WITH:  SHELBY COUNTY PROBATE JUDGE	
<input type="checkbox"/> Additional debtors on attached UCC-E		4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)	
3. NAME AND ADDRESS OF SECURED PARTY (Last Name First if a Person)  CENTRAL STATE BANK Highway 25 P.O. Box 180 Calera, Alabama 35040		4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)	
Social Security/Tax ID # _____		4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)	
<input type="checkbox"/> Additional secured parties on attached UCC-E		4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)	
5. The Financing Statement Covers the Following Types (or items) of Property:			

1988 EMBASSY 16 x 70 MOBILE HOME SERIAL AND MODEL NUMBER GDAIAL 7270

5A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:


Check X if covered: ☐ Products of Collateral are also covered.

6. This statement is filed without the debtor's signature to perfect a security interest in collateral (check X, if so)
- ☐ already subject to a security interest in another jurisdiction when it was brought into this state.
- ☐ already subject to a security interest in another jurisdiction when debtor's location changed to this state.
- ☐ which is proceeds of the original collateral described above in which a security interest is perfected.
- ☐ acquired after a change of name, identity or corporate structure of debtor
- ☐ as to which the filing has lapsed.

7. Complete only when filing with the Judge of Probate:  
 The initial indebtedness secured by this financing statement is \$ 12,800.00  
 Mortgage tax due (15¢ per \$100.00 or fraction thereof) \$ 35.20
8. ☐ This financing statement covers timber to be cut, crops, or fixtures and is to be cross indexed in the real estate mortgage records (Describe real estate and if debtor does not have an interest of record, give name of record owner in Box 5)

Charles A. Jones  
 Signature(s) of Debtor(s)

Cheryl H. Jones  
 Signature(s) of Debtor(s)

[Signature]  
 Signature(s) of Secured Party(ies)  
 (Required only if filed without debtor's signature — see Box 6)

CENTRAL STATE BANK  
 Signature(s) of Secured Party(ies) or Assignee

Type Name of Individual or Business

Type Name of Individual or Business

(1) FILING OFFICER COPY - ALPHABETICAL  
 (2) FILING OFFICER COPY - NUMERICAL

(3) FILING OFFICER COPY - ACKNOWLEDGEMENT  
 (4) FILE COPY - SECURED

(5) FILE COPY DEBTOR(S)

STANDARD FORM — UNIFORM COMMERCIAL CODE — FORM UCC-1  
 Approved by The Secretary of State of Alabama